## PATENT APPLICATION FEE DETERMINATION RECORD . Effective January 1, 2003

Application or Docket Number

10601102

| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)   |  |   |                    |                               |                             |                  |       | SMALL ENTITY TYPE   |                        | OTHER THAN<br>OR SMALL ENTITY |                |                        |
|--|--|---|--------------------|-------------------------------|-----------------------------|------------------|-------|---------------------|------------------------|-------------------------------|----------------|------------------------|
| Τ  | TAL CLAIMS                                     |   | 34                 |                               | 7                           |                  |       | RATE                | FEE                    | 1                             | RATE           | FEE                    |
| FO   | Я.   |   | NUMBER FILED       |                               | NUMB                        | ER EXTRA         |       | BASIC FEE           | 375.00                 | OR                            | Basic Fee      | 750.00                 |
| TO   | TAL CHARGEA                                    | BLE CLAIMS                                | 34 minus 20=       |                               | • 14                        |                  |       | X\$ 9=              | 126                    | OR                            | X\$18=         |                        |
| IND  | EPENDENT CL                                    | AIMS.                                     | 6 minus 3 =        |                               | 3                           |                  |       | X42=                | 126                    | OR                            | X84=           |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                    |                               |                             |                  |       | +140=               |                        | OR                            | +280=          |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                    |                               |                             |                  |       | TOTAL               | 627                    | OR                            | TOTAL          |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |  |   |                    |                               |                             |                  |       | SMALL               |                        | OR                            | OTHER<br>SMALL |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | 10 <b>1</b> 2      | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE           | ADDI-<br>TIONAL<br>FEE |
| MON  | Total  | . 34                                      | Minus .            | . /                           | 34                          | -83              |       | X\$ 9=              |                        | OR                            | X\$18=         |                        |
|  | independent                                    | . 6                                       | Minus              | ***                           | 6                           | -63              |       | X42=                |                        | OŔ                            | . X84=         |                        |
| 10   | FIRST PRESE                                    | NTATION OF MI                             | JUTIPLE DEP        | ENDEN                         | CLAIM                       |                  |       | +140=               |                        | OR                            | +280=          |                        |
|  |  |   |                    |                               |                             |                  |       | TOTAL<br>ADDIT. FEE | 6                      | OR                            | ADDIT. FEE     |                        |
| $\perp$  | 14/05  | (Column 1)                                |                    | -                             |                             |                  |       |                     |                        |                               |                |                        |
| AMENDMENT B -  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE           | ADDI-<br>TIONAL<br>FEE |
|  | Total  | . 10,                                     | Minus              | **                            | 34                          | -                |       | X\$ 9=              |                        | OR                            | X\$18=         |                        |
|  | independent                                    | . 3                                       | Minus              | este                          | 6                           | •/-              | 4 1   | X42=                |                        | OR                            | X84=           |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |                    |                               |                             |                  |       | +140=               |                        | OR                            | +280=/         |                        |
|  |  |   |                    | •                             |                             |                  |       | TOTAL<br>ADDIT. FEE |                        | OR                            | TOTAL          |                        |
|  |  | (Column 1)                                |                    |                               | mn 2)                       | (Column 3)       | _     |                     |                        |                               |                |                        |
| MC   | alay.  | CLAIMS REMAINING AFTER AMENDMENT          |                    | . NUM                         | IEST<br>BER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE           | ADDI-<br>TIONAL<br>FEE |
| AMENDME  | Total  | •   | Minus              | 611                           |                             |                  |       | X\$ 9=              |                        | 02                            | X\$18=         |                        |
| ME   | ind pendent                                    | •   | Minus              | ***                           |                             | ]                |       | X42=                |                        | OR                            | X84=           |                        |
| ٩  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                    |                               |                             |                  |       | +140=               |                        | OR                            | →280=          |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20.  **ADDIT, FEE |  |   |                    |                               |                             |                  |       |                     |                        | OR                            | TOTAL          |                        |
| **   | The Taghest Ni                                 | imber Previously P<br>nber Previously Pa  | and Poor" (Total o | r Indopent                    | itted ei (Inel              | e highest numb   | er fo | und in the ap       | propriate bo           | ox in co                      | otumn 1.       |                        |